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Mia M. Wirtjes inquired with Mary Ann Halloran, Pharm.D., BCPS regarding opportunities to participate in a clinical service project involving patient care. Her professors' unique practice site, a pharmacist-directed disease management clinic at Tinker Air Force Base focused on the preventive care and management of diabetic patients. Mia elected to proceed with a two-phase project aimed at improving pneumococcal vaccination rates in high-risk patients receiving medical care within the medical treatment facility (MTF).

In developing the project, Mia began with an initial phase directed toward patients enrolled in the diabetes management service of the MTF. Using available data from medical records, immunization databases, and other resources within the facility, Mia established the baseline vaccination rates for diabetic patients consulted to the service. Given the privileges afforded pharmacists under approved protocol within the MTF, patients were counseled at their next diabetes management visit about their risk for pneumococcal pneumonia and the recommendation for intervention by the patient's primary care manager was outlined in the clinic visit progress note. If the first intervention for vaccination was unsuccessful, the patient was then presented with a prescription to receive the pneumococcal vaccination through the on-site immunization clinic of the MTF

In the first phase, three-hundred sixteen diabetic patients were consulted to the diabetes management clinic, 289 patients before implementation of the prescription intervention and 27 patients added during the intervention period. Of the original 289 patients, 195 were unvaccinated at baseline, with 40 (20.5%) of these vaccinated following recommendations through progress notes. Of the 27 new referrals, 20 previously unvaccinated patients were added to the remaining 155 unvaccinated patients prime for more aggressive intervention. Prescriptions were provided to 48/175 patients in this group, 16 (33.3%) of whom then obtained a pneumococcal vaccination. The second phase of this intervention is in the planning stages, intended to target all high-risk diabetics of the near 28,000 patients receiving care within this facility. In designing and modifying this phase, Mia has utilized the results of the first phase to identify barriers to implementation for the larger group and potentially improve the success rate of the intervention.

This project represents the potential for a simple but meaningful intervention to impact the prevention of an illness with significant morbidity and mortality risks. It further defines the important role future pharmacists can serve within health systems as members of health care teams in both the education of patients and in preventive health. The integration of pharmacy students in projects of this nature early in their academic careers exposes them to opportunities to serve

public health and expand their involvement in service areas of our health care system.